Approved for use through 7/31/2008. Osland

Under the Pr	perwark R	aduction A	1 of 1995	no perso	ns me fe	guired to respo	nd to	a collection of	indement La noitemoisi	Office; LL.i Inters it di	DEPARTMEN	T OF COL	MERCE
	-AIEN		ON FE		ION	N RECORD			los; LLS, DEPARTMENT OF COMMERCE uses it displays a valid QMB control number Application or Dockel Number 07790670				
CLAIMS AS FILED - PART I													
9-1-	05	(Column 1)			(Cotumn 2)			SMALL ENTITY		. Of	OTHER THAN R SMALL ENTITY		N TY
FOR BASIC FEE	NUMBER FILED			NUMBER EXTRA		_1	RATE	FEE	7	2175	1		
(37 CFR 1.16(a)	<u></u>						150		7	RATE		FEE .	
TOTAL CLAHAS (37 CFR 1.18(c))		3:	32 minu 32		. (7	x: 25.		┙┉			
HOEPENDENT CLAIRS O7 CFR 1.16(b))		9	9 0		_		1		┼	_ OR	x1 20	<u> </u>	
		eunim				-	x : 100.		_ OR	× :200			
MAILTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+:180.		OR.	1.360		
* If the difference in column 1 is less than zero, enter "O" in column 2.								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II													
		kumn 1)	· -		lumn 2) HEST	(Column 3)		SMALL	ENTITY	OR	OTH	ER THAN	4
¥ 10/19/05	RE	MAINING AFTER		NU	Mesi MBER IOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL	7	RATE	AC	ID)
Total	- 	POMENT	Mintes		FOR		4		FEE	1	<u>L</u> .		NAL EE
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E CONTROL	*	<u> </u>	Minus		9	. 0	11	x \$ 100 .		OR	x : 200.	1	
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AMSZ								ADD'L FEE	<u> </u>	OR	ADOL FEE	L	
		LABAS	Т	(Cot	umn 2) EST	(Column 3)				_			
3/6/2		MINING FTER		NUM PREVIO	8ER	PRESENT EXTRA	П	RATE	ADD)-		RATE	ADI	NI:
1 / /U		MOMENT		PAID	FOR		ΙL		TIONAL FEE			FION	IAL
2 COLCUM LINES	, 5	13	Minus	3	5	- 10		× 25.	2500	D OR	x.50	 "	
Car com 1,140		7 .	Minus	9		•		x :100.		OR	x . 200.		-
PRSTPRES	ENTATION C	E DEPENDI	ENT CLASM	(D) (C)		+1/80.		OR	+360.	1	\vdash		
			•					TOTAL ADD'L FEE	2501		TOTAL	+	\mathcal{H}
		(Cotur	n= 2)	•	COCITE E	000	bot	ADD'L FEE	سا	4 =			
,	a	mn 1) AIMS		HIGH	EST	(Caturen 3)	г			1	· · · · · ·		
	AF	aining Ter Dment,		PREVIO	USLY	PRESENT EXTRA		RATE	ADD)- TIONAL		RATE	ADD TION	
Total (37 CFR 1.15(c))	1.		Minus	**		•	1	,25.	FEE			FEE	
Total (tr cre v.sigg Independent (tr ora v.sep)	1.		Minus	•••						OR	x:50.	<u> </u>	
FURLIT PRESE	NTATION O	DEPONDE	NT CLAIM		—	100.		OR	× 200.	 	\dashv		
			, 11	7	s/80.		OR	+ s,3600					
* If the entry in	the entry	in column	2, write		DOLFEE	لــــــ	QR	ADD'L FEE	<u> </u>				
" if the "Higher" if the "Higher	it Michigae I	Promiter with a	D-14 E	M THE #	D4/T 1-			20°.					
The Highest	Number Pr	eviously Pa	dd Por' (T	otal or he	ispender	reas usen 3, 6/1 d) is the biobas	er 3.					•	

The "Highest Number Previously Path For" (Total or Independent) is the highest number found in the appropriate box in colorma.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fide (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, britishing, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form ane/for suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO TMIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.